ARKANSAS STATE BOARD OF PRIVATE CAREER EDUCATION 501 WOODLANE, SUITE 312 SOUTH LITTLE ROCK, AR 72201 PHONE (501) 683-8000

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APP Reviewed by

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FORM 1350 - STUDENT INFORMATION SHEET FOR A CLOSING SCHOOL

No Fee

COURSES THE STUDENT HAS NOT COMPLETED. STATEMENT OF COMPLIANCE							
the previous ninety (90) calendar days of the date of the school closing and has not completed the program of study. (Lines will expand as needed) STUDENT'S LAST NAME STUDENT'S FIRST NAME MAILING ADDRESS CITY STATE ZIP PHONE NUMBER Last (4) Digits of Social Security Number NAME OF PROGRAM IN WHICH STUDENT IS ENROLLED Total Cost of Program Total Number of Hours in Program Total Number of Hours Student Has Completed Tuition Earned Registration Fee Total Monies Earned Registration Fee Books and Supplies Balance Due to School Other Expenses Refund Due to Student ATTACH A CURRENT TRANSCRIPT FOR THIS STUDENT. ON PAGE 2 OF THIS FORM, LIST THE COURSES THE STUDENT HAS NOT COMPLETED. STATEMENT OF COMPLIANCE Under penalty of perjury, I declare and affirm that the statements made on this form, including any attached sheets, are true, complete, and accurate. Printed Name of Official Title	NAME OF SCHOOL						
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Signature of Official Date	Printed Name of Official		Title				
	Signature of Official		Date				

STUDENT'S LAST NAME	STUDENT'S FIRST NAME	

LIST COURSES STUDENT HAS NOT COMPLETED

COURSE NUMBER	COURSE TITLE	HOURS IN COURSE